PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

09986928

		CLAIMS AS	1	SMALL ENTIT			YTITY		OTHER	THAN			
			(Column 1)		(Column 2)			TYPE		OR		IALL ENTITY	
TOTAL CLAIMS			41				R	ATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BAS	IC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			4∫ minus 20=		* 21		X	\$ 9=		OR	X\$18=	378	
INDEPENDENT CLAIMS			5 minus 3 =		* 2		X	42=		OR	X84=	168	
MU	LTIPLE DEPEN	DENT CLAIM PI	IESENT				+1	40=		OR	+280=		
* If the difference in column 1 is less than zero					o, enter "0" in column 2			TAL	\	OR	TOTAL	1286	
	C	LAIMS AS A	MENDED	NENDED - PART II						4	OTHER		
	Lagrania de Caraciante de La Caraciante de	(Column 1)		(Colum		(Column 3)	mn 3) SMALL		ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	R.	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X:	9=		OR	X\$18=		
	independent	*	Minus *** TION OF MULTIPLE DEPENDEN		F.CL AIM	=	×	42=		OR	X84=		
<u> </u>	FINOT PRESE	NIATION OF INC	DETIFIE DEF	LINDEIN	CLAIIVI		+1	40=		OR	+280=		
								TOTAL T. FEE		OR	TOTAL ADDIT, FEE	-	
		(Column 1)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,										
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F		PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X	9=		OR	X\$18=		
	Independent	*	Minus	***	CLAIM	=	X.	12=		OR	X84=		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							40=		OR	+280=		
								TOTAL		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RA	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X	9=		OR	X\$18=		
	Independent	*	Minus	***	T CL AIM	= [X	12=		OR	X84=		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140=									OR	+280=		
**	If the "Highest Nu	mn 1 is less than th mber Previously Pa	aid For" IN THIS	SPACE	is less thai	n 20, enter "20."		OTAL I. FEE		OR .	TOTAL ADDIT. FEE		
**	If the "Highest Nu	mber Previously Pa ber Previously Pa	aid For" IN THI	S SPACE	is less tha	n 3, enter "3."	المال		oropriate box				